James

	कान स्वाप नाम
FRED. S. JAMES & CO. OF WASHINGTON	1700 Fourth & Blanchard Building, Washington 98121 206 623-5900
Date: 4- 2.5 -85	The attached endorsement effects the insurance change recently ordered.
Linda Jacobson	We enclose our invoice for the installment premium under the policy.
From:	Renewal policy enclosed continuing coverage. Certificate of insurance enclosed per your request.
	Certificate of insurance enclosed per your request.
U.S. EPA Waste Management Branch (M/S 530A	
1200 Sixth Avenue	RE: CHEMICAL PROCESSORS, INC.
Seattle, Wa. 98101	

~ 1985

F.S.J. - 2 REV. 84

USEPA RCRA

3012258

COIC CERTIFICATE OF INSURANCE

SET TAB STOPS AT ARROWS
ISSUE DATE (MM/DD/YY)

4-10-85

_	_	_		
0			IC	

FRED.S. JAMES & CO. 1700 Fourth & Blanchard Bldg. Seattle, Wa. 98121 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY

UNITED STATES FIDELITY & GUARANTY

INSURED

CHEMICAL PROCESSORS, INC. 5501 Airport Way S. Seattle, Wa. 98108

COMPANY LETTER

COMPANY

COMPANY LETTER

COMPANY E

COVERAGES

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF SUCH POLICIES.

	TIONS OF SUCH POLICIES.						
CO	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIABILIT	EACH OCCURRENCE	AGGREGATE
A	GENERAL LIABILITY X COMPREHENSIVE FORM	Da H.	- 1151	GTENON!	BODILY INJURY	\$	\$
	X PREMISES/OPERATIONS	MP064078070	4-1-85	4-1-86	PROPERTY DAMAGE	\$	\$
	X EXPLOSION & COLLAPSE HAZARD X PRODUCTS/COMPLETED OPERATIONS X CONTRACTUAL	12001070070			BI & PD COMBINED	\$ 500	\$ 500
	X INDEPENDENT CONTRACTORS X BROAD FORM PROPERTY DAMAGE X PERSONAL INJURY			The second secon	PERSON	IAL INJURY	\$ 500
	AUTOMOBILE LIABILITY				BODILY INJURY (PER PERSON)	\$	1911
	ANY AUTO ALL OWNED AUTOS (PRIV. PASS.)				BODILY INJURY (PER ACCIDENT)	\$	
	ALL OWNED AUTOS (OTHER THAN) HIRED AUTOS (PRIV. PASS.)				PROPERTY DAMAGE	\$	
	NON-OWNED AUTOS GARAGE LIABILITY				BI & PD COMBINED	\$	
	EXCESS LIABILITY UMBRELLA FORM OTHER THAN UMBRELLA FORM				BI & PD COMBINED	\$	\$
	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY				STATUTO \$	(EACH A	ACCIDENT) E-POLICY LIMIT) E-EACH EMPLOYEE)
	OTHER				Ψ	(DIOLAC	E ENGINERII EGITES

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

EPA #WAD 000 812 917

PIER 91, SEATTLE, WA. 98119

EPA #WAD 000 812 909

734 S. LUCILLE ST., SEATTLE, WA. 98108

EPA #WAD 020 257 945 1701 ALEXANDER S

1701 ALEXANDER ST., TACOMA, WA. 98402

CERTIFICATE HOLDER

U.S. EPA

Waste Management Branch (M/S 530A) 1200 Sixth Avenue

Seattle, Wa. 98101

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF. THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 60. DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY. TO AGENTS OR REPRESENTATIVES.

UTHORIZED REPRESENTATI

© IIR/ACORD CORPORATION 1984



UNITED STATES FIDELITY & GUARANTY COMPANY of BALTIMORE, MARYLAND hereby certifies that it has issued liability covering Bodily Injury and Property Damage to CHEMICAL PROCESSORS, INC. of 5501 Airport Way South, Seattle, Washington 98108 in connection with the insured's obligation to demonstrate financial responsibility under 40CFR 264.147 or 265.147.

The coverage applies at

EPA #WAD 000 812 909 734 South Lucille St. Seattle, Wa. 98108

EPA #WAD 000 812 917 Pier 91 Seattle, Washington 98119

EPA #WAD 020 257 945 1701 Alexander St. Tacoma, Wa. 98421

for sudden accidental occurrences.

The limits of liability are \$500,000 each occurrence and \$500,000 annual aggregate, exclusive of legal defense costs. The coverage is provided under policy MP064078070 and is effective April 1, 1985 to April 1, 1986.

The insurer further certifies the following with respect to the insurance descirbed in Paragraph 1:

- (a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the policy.
- (b) The insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer. This provision does not apply with respect to that amount of any deductible for which coverage is demonstrated as specified in 40CFR 264.147 (f) or 265.147(f).
- (c) Whenever requested by a Regional Administrator of the U.S. Environmental Protection Agency (EPA) the Insurer agrees to furnish to the Regional Administrator a signed duplicate original of the policy and all endorsements.

James

- (d) Cancellation of the insurance, whether by the Insurer or the insured, will be effective only upon written notice and only after the expiration of sixty (60) days after a copy of such written notice is received by the Regional Administrator of the EPA Region in which the facilities are located.
- (e) Any other termination of the insurance will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Regional Administrator of the EPA Region in which the facilities are located.

I hereby certify that the wording of this instrument is identical to the wording specified in 40 CFR 264.151(j) as such regulation was constituted on the date first above written, and that the insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more states.

Signed By:

Robert F. Mauseth

Assistant Vice-President
Authorized Representative of
United States Fidelity and
Guaranty Co.

1700 Fourth & Blanchard Bldg Seattle, Washington 98121

SET TAB STOPS AT ARROWS ISSUE DATE (MM/DD/YY)

4-10-85

-	_	_	_	_	_	_
5	P	0		110	?F	FR

INSURED

FRED.S. JAMES & CO. 1700 Fourth & Blanchard Bldg. Seattle, Wa. 98121

CHEMICAL PROCESSORS, INC.

5501 Airport Way S.

Seattle, Wa. 98108

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY A LETTER

ASSOCIATED INTERNATIONAL, INC.

COMPANY LETTER

INDUSTRIAL INDEMNITY CO.

COMPANY LETTER

COMPANY LETTER

COMPANY LETTER

COVERAGES

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF THE POLICIES DESCRIBED HEREIN IS SUBJECT. TIONS OF SUCH POLICIES.

GENERAL LIABILITY COMPREHENSIVE FORM PREMISSIONERATIONS UNDERGROUND EXPLOSION'S COLLARSE HAZARD PRODUCTS COMPLETED OPERATIONS CONTRACTUAL INDEPENDENT CONTRACTORS BROAD FORM PROPERTY DAMAGE PERSONAL INJURY AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS (PRIV. PASS.) ALL OWNED AUTOS (PRIV. PASS.) ALL OWNED AUTOS (PRIV. PASS.) HIRED AUTOS GRAFAGE LIABILITY ULIl10662 A This policy excludes pollution liability WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY OTHER POllution Liability S (INSEASE-ROLLEVILLINIT) S (INSEASE-ROLLEWIT)						LIADUIT	VILIANTO IN TH	OLICANDO
COMPREHENSIVE FORM PREMISES/OPERATIONS UNDERSOUND EXPLOSION & COLLAPSE HAZARD PRODUCTS/COMPLETED OPERATIONS CONTRACTUAL INDEPENDENT CONTRACTORS BROAD FORM PROPERTY DAMAGE PERSONAL INJURY AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS (PRIV. PASS.) ALL OWNED AUTOS (PRIV. PASS.) HIRED AUTOS GARAGE LIABILITY UNITIONAME AUTOS UNDERSONAL SUBJECT AVECES LIABILITY UNITIONAME OF THAN UMBRELLA FORM OTHER THAN UMBRELLA FORM OTHER THAN UMBRELLA FORM OTHER THAN UMBRELLA FORM WORKERS: COMPENSATION AND EMPLOYERS: LIABILITY OTHER POllution Liability SUGGEN/Accidental Environmental Impairment SES609243 4-1-85 4-1-86 SCONDINGO STATUTORY STATUTORY STATUTORY STATUTORY STATUTORY \$5,000,000 Limit \$5,000,000 Aggregate	CO	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)		LIABILI	EACH	
PREMISES/OPERATIONS UNDERGROUND UNDERGROUND PRODUCTS/COMPLETED OPERATIONS CONTRACTUAL INDEPENDENT CONTRACTORS BROAD FORM PROPERTY DAMAGE PERSONAL INJURY ANY AUTO ALL OWNED AUTOS (PRIV. PASS.) ALL OWNED AUTOS (PRIV. PASS.) HIRED AUTOS GARAGE LIABILITY HIRED AUTOS GARAGE LIABILITY WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY OTHER POllution Liability OTHER POllution Liability OTHER POllution Liability SE8609243 4-1-85 4-1-86 PROPERTY S SAMAGE S S S PERSONAL INJURY \$ BLA PD COMBINED S S BLA PD COMBINED S S BLA PD COMBINED S S (EACH ACCIDENT) S (IDSEASE-POLICY LIMIT) S (IDSEASE-POLICY LIMIT) S SUGGEN/ACCIDENTI S S S S S S S S S S S S S S S S S S S						BODILY INJURY	\$	\$
PRODUCTS/COMPLETED OPERATIONS CONTRACTUAL INDEPENDENT CONTRACTORS BROAD FORM PROPERTY DAMAGE PERSONAL INJURY AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS (PRIV. PASS.) ALL OWNED AUTOS (PRIV. PASS.) ALL OWNED AUTOS (PRIV. PASS.) HIRED AUTOS NON-OWNED AUTOS (PRIV. PASS.) ONN-OWNED AUTOS (PRIV. PASS.) UILl10662 EXCESS LIABILITY To MARRELLA FORM OTHER THAN UMBRELLA FORM OTHER POllution Liability OTHER POllution Liability TO SUGGENCY SERGONDON DESIGNED SERGOND		PREMISES/OPERATIONS					\$	\$
CONTRACTORS BROAD FORM PROPERTY DAMAGE PERSONAL INJURY \$		PRODUCTS/COMPLETED OPERATIONS				BI & PD	\$	· \$
PERSONAL INJURY AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS (PRIV. PASS.) ALL OWNED AUTOS (OTHER THAN) HIRED AUTOS GARAGE LIABILITY X UMBRELLA FORM OTHER THAN UMBRELLA FORM WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY OTHER POllution Liability Sudden/Accidental Environmental Impairment PERSONAL INJURY \$ 80017 NPR PROPERTY NIRY PER ACCENT SOUND SOUND SOUND PROPERTY DAMAGE \$ BI A PD COMBINED \$ 5,000 \$ STATUTORY STATUTORY \$ (DISEASE-POLICY LIMIT) \$ (DISEASE-ACH EMPLOYEE) STATUTORY \$ (DISEASE-ACH EMPLOYEE) STATUTORY \$ (DISEASE-ACH EMPLOYEE) STATUTORY \$ (DISEASE-ACH EMPLOYEE) S 5,000,000 Limit \$ \$5,000,000 Aggregate \$ \$ 25,000 Deductible	+					COMBINES	T .	
AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS (PRIV. PASS.) ALL OWNED AUTOS (OTHER THAN) HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY AVAILABLE AND EMPLOYERS' COMPENSATION AND EMPLOYERS' LIABILITY OTHER POllution Liability OTHER Pollution Liability SE8609243 ENVIRONMENTAL IMPAirment AUTOMOBILE LIABILITY SUDDICY NER PRODERTY SHE PO COMBINED \$ 18.4 PD COMBINED \$ 5,000 \$ 5,000 \$ 5,000 \$ 5,000 Limit \$ (DISEASE-EACH EMPLOYEE) OTHER POllution Liability SE8609243 A-1-85 A-1-86 B-1-86 A-1-86 B-1-86 B				1 ,		PERSON	IAL INJURY	\$
ALL OWNED AUTOS (PRIV. PASS.) ALL OWNED AUTOS (OTHER THAN) HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY OTHER POllution Liability SE8609243 Environmental Impairment ALL OWNED AUTOS (OTHER THAN) HIRED AUTOS PROPERTY S BI & PD COMBINED S 1 A-1-86 BI & PD COMBINED S 5,000 \$ 5,000 \$ 5,00						INJURY	\$	
HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY A EXCESS LIABILITY A UMBRELLA FORM OTHER THAN UMBRELLA FORM WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY OTHER POllution Liability OTHER POllution Liability SE8609243 Environmental Impairment HIRED AUTOS BI & PD COMBINED \$ 5,000 \$ 0DISEASE-POLICY LIMIT) \$ 0DISEASE-POLICY LIMIT) \$ 5,000,000 Limit \$ 5,000,000 Aggregate \$ 25,000 Deductible		ALL OWNED AUTOS (PRIV. PASS.)				BODILY INJURY	\$	
GARAGE LIABILITY EXCESS LIABILITY WILL 10662 WORKERS COMPENSATION AND EMPLOYERS LIABILITY OTHER POllution Liability OTHER POllution Liability SE8609243 GARAGE LIABILITY UIL 10662 4-1-85 4-1-86 BI & PD COMBINED \$ 5,000 \$ 5,000 STATUTORY STATUTORY STATUTORY (DISEASE-POLICY LIMIT) SUDISEASE-EACH EMPLOYEE) \$5,000,000 Limit \$5,000,000 Aggregate \$5,000,000 Aggregate \$5,000 Deductible		HIRED AUTOS					\$	
WORKERS' COMPENSATION AND EMPLOYERS LIABILITY OTHER POllution Liability SE8609243 SE8609243 A-1-85 4-1-86 COMBINED \$ 5,000						BI & PD COMBINED	\$	
WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY OTHER Pollution Liability Sudden/Accidental Environmental Impairment STATUTORY \$ (EACH ACCIDENT) \$ (DISEASE-POLICY LIMIT) \$ (DISEASE-EACH EMPLOYEE) \$ 5,000,000 Limit \$ 55,000,000 Aggregate \$ 25,000 Deductible	A	X UMBRELLA FORM				BI & PD COMBINED	\$5,000	\$ 5,000
WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY OTHER Pollution Liability Sudden/Accidental Environmental Impairment \$ (EACH ACCIDENT) \$ (DISEASE-POLICY LIMIT) \$ (DISEASE-EACH EMPLOYEE) \$ \$5,000,000 Limit \$ \$5,000,000 Aggregate \$ \$5,000,000 Aggregate \$ \$5,000 Deductible	H	UTHER THAN UMBRELLA FORM	"TILLS POLICY EXCLUDES POLITIC.	On Itabil	LLY	STATUTO	DRY	2 0 0 0 0 0
AND EMPLOYERS' LIABILITY OTHER Pollution Liability Sudden/Accidental Environmental Impairment SUBSEASE-POLICY LIMIT) \$ (DISEASE-POLICY LIMIT) \$		WORKERS' COMPENSATION				- Company Control		(CCIDENT)
OTHER Pollution Liability Sudden/Accidental SE8609243 Environmental Impairment \$ (DISEASE-EACH EMPLOYEE) \$ 5,000,000 Limit \$ 5,000,000 Aggregate \$ 25,000 Deductible		AND				200000000000000000000000000000000000000	(DISEAS	E-POLICY LIMIT)
Sudden/Accidental SE8609243 4-1-85 4-1-86 \$5,000,000 Aggregate Environmental Impairment \$ 25,000 Deductible		EMPLOYERS' LIABILITY					(DISEAS	E-EACH EMPLOYEE)
THE Y ALL OF MINOR A SOCIETY AND A SOCIETY A	В	Sudden/Accidental	SE8609243	4-1-85	4-1-86	\$5,00	0,000 Ag	gregate
						15 2	5,000 De	ductible

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

EPA #WAD 000 812 917 PIER 91, SEATTLE, WA. 98119

EPA #WAD 000 812 909 734 S. LUCILLE ST., SEATTLE, WA. 98108

1701 ALEXANDER ST., TACOMA, WA.
CANCELLATION EPA #WAD 020 257 945

CERTIFICATE HOLDER

U.S. EPA

Waste Management Branch (M/S 530A) 1200 Sixth Avenue Seattle, Wa. 98101

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EX-PIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

usest

	ROUTING AND	TRANSMITTAL SLIP	Date 4/3	0/85	
TO	(Name, office symbouilding, Agency/Po	ol, room number, ost)		Initials	Date
1.	Andy E			in.	
2.	0				
3.					
L					
S.				en en en	
	Action	File	Note	and Retu	m
	Approval	For Clearance	Per	Conversati	on
	As Requested For Correction Prepare Reply				
	Circulate	Me			
	Comment Investigate Signature				
	Coordination	Justify			

Review of CMEC Since Wayne less a vested interest, share fundings wy huin.

Thanks,

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

FROM: (Name,	org. symbol, Agency/Post)	Room No.—Bldg.
	(Ku	Phone No.

5041-102

OPTIONAL FORM 41 (Rev. 7-76)
Prescribed by GSA
FPMR (41 CFR) 101-11.206